## UTILITY PATENT APPLICATION TRANSMITTAL

(New Nonprovisional Applications Under 37 CFR § 1.53(b))

Attorney Docket No. 024.0053

## **EXPRESS MAIL #ER 454373341 US**

## TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is the patent application of ( ) application identifier or (X) first named inventor, Kenneth N. Telford, entitled, for a(n):

SHOCK AND VIBRATION ISOLATION SYSTEM				
(X) Original Patent Application.				
( ) Continuing Application (prior application not abandoned):				
( ) Continuation ( ) Divisional ( ) Continuation-in-part (CIP)				
of prior application No: Filed on:				
( ) A statement claiming priority under 35 USC § 120 has been added to the specification.				
Enclosed are:				
(X) Specification: <u>9</u> Total Pages.				
(X) Claims: <u>4</u> Total Pages.				
(X) Abstract: <u>1</u> Total Page.				
(X) Formal Drawing(s): 9 Total Sheets.				
() Informal Drawing(s):Total Sheets.				
(X) Oath or Declaration:				
(X) A Newly Executed Combined Declaration and Power of Attorney:				
(X) Signed. ( ) Unsigned. ( ) Partially Signed.				
( ) A Copy from a Prior Application for Continuation/Divisional (37 CFR § 1.63(d)).				
( ) Incorporation by Reference. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied, is considered as being part of the disclosure of the accompanying.				
application and is hereby incorporated herein by reference.				
( ) Signed Statement Deleting Inventor(s) Named in the Prior Application. (37 CFR § 163(d)(2)).				
( ) Power of Attorney.				
( ) Associate Power of Attorney.				
(X) A Check #2440 in the amount of \$896.00 for the Fees associated with this filing.				
( ) Preliminary Amendment.				
( ) A Duplicate Copy of this Form for Processing Fee Against Deposit Account.				
( ) A Certified Copy of Priority Documents (if foreign priority is claimed).				
(X) Information Disclosure Statement, Form PTO/SB/08A.				
(X) Return Receipt Postcard.				
(X) Assignment and Recordation Cover Sheet.				
( ) Other:				
CLAIMS AS FILED				

		CLAIMS AS FILED		
FOR	NO. FILED	NO. EXTRA	RATE	FEE
Total Claims	19	0	\$18.00	\$0
Independent Claims	4	1	\$86.00	\$86.00
Multiple Dependent Cla	\$0			
Assignment Recording I	\$40.00			
Basic Filing Fee				\$770.00
			Total Filing Fee	\$896.00

to Deposit Account 50-2091 pursuant to 37 CFR § 1.25. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 50-2091.

By:

Respectfull

Brett A. Carlson Reg. No. 39,928

submitte

Date:

Correspondence Address:

CUSTOMER NO. 29,906

INGRASSIA FISHER & LORENZ, P.C.

7150 E. Camelback Road

Suite 325

Scottsdale, AZ 85251

Phone: 480-385-5060

Fax: 480-385-5061